

**DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A System or Method for Assessing a Subject's Peripheral Blood Circulation

the specification of which:

(check one) ☐ is attached hereto.

☐ was filed on _____ as U.S. Application Serial No. _____, and was amended on _____ (if applicable).

☒ was described and claimed in PCT International Application Number PCT/GB2005/000051 filed on January 10, 2005 and

☐ as amended under PCT Article 19 on _____ (if any) and/or

☒ as amended under PCT Article 34 as published in the Annex(es) to the International Preliminary Examination Report (if any).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, §1.56

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate(s) listed below and have also identified below any foreign application(s) for patent or inventor's certificate(s) having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

0400281.2
(Number)

Great Britain 8 January 2004
(Country) (Day/Mon/Year Filed)

☒ Yes ☐ No

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(1) FULL NAME LAST NAME FIRST NAME MIDDLE NAME
OF INVENTOR: Crabtree Vincent Peter

RESIDENCE & CITY & STATE OR COUNTRY CITIZENSHIP
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Signature Vincent Crabtree Date 16/10/06

(2) FULL NAME LAST NAME FIRST NAME MIDDLE NAME
OF INVENTOR: Smith Peter Richard
(Deceased)

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Signature Smith Date 16/10/06

T. Simpson

(Executor to Estate 22/11/06
of P R Smith)

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DECLARATION Supplemental Sheet
For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated InventorEnter Deceased or Incapacitated Inventor's Name Peter Richard SMITHPage 1 of 1

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
JENNETTE MARY-TERESA		SMITH	
Legal Representative's Signature		Date 16/10/06	
Residence: City	LEICESTER	State	Country UK
Citizenship			
Mailing Address 4, BATSONS COURT, TOP ROAD, GRIFFYDAM			
Mailing Address LEICS LE67 8HX			
City	State	Zip	Country
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Terry Anthony		Simpson	
Legal Representative's Signature		(Executor of Estate)	
Residence: City	Leicester	State	Country UK
Citizenship			
Mailing Address 5 Herriek Road			
Mailing Address Woodhouse Green			
City	Loughborough	State	Zip LE12 8XJ
Country		UK	
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Legal Representative's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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